

During that period, no one could debate it. No one could amend it. The Republicans have conceded that they are finished with the debate and amendment phase of health care reform. They have decided now that the only thing they could possibly do is to delay everything the Senate can consider in the hopes that maybe we get tangled up with our desire personally to be home with our families during the holidays and would not do our duty here.

They are wrong. We are determined to do this. We are determined because health care reform for this country is so absolutely essential. The Presiding Officer has an awesome assignment, succeeding the late Senator Ted Kennedy whom he counted as a close friend and served as a member of his staff.

In our cloakroom is a cover of Time magazine where Senator Kennedy is looking out with that smile on his face saying: We are almost there. It was an article he wrote before he died about health care reform. He, more than any person in the Senate, had the authority to speak to it. Senator KIRK told us in a meeting of our caucus the other day that it was 40 years ago when Senator Kennedy took to the floor as a young man and talked about the priority of health care reform. Forty years, when you think about it, 40 years of waiting for this moment to vote on health care reform. If he were here today—and I wish to God he were—he would be back there at that desk—that was Kennedy's spot—thundering in this Senate Chamber about this historic opportunity and how if it costs us Christmas Eve or costs us Christmas Day or even more, we cannot let down the people of this country.

I see the polls. This complicated issue of health care reform has a lot of people confused and even worried. They have heard some of the wild charges on the other side. At one point they were arguing about death panels; that ultimately the government was going to decide whether people would live or die. That was one of the cruelest distortions in this debate.

The actual issue was raised by Senator JOHNNY ISAKSON, who is a Republican of Georgia, whom I thought raised a serious and important consideration and one that all of us, though we might not want to, should reflect on. He said every person under Medicare ought to have a compensated, paid-for visit to a doctor if they want, voluntarily, to talk about end-of-life treatment. There is hardly a family in America who doesn't contemplate that possibility, doesn't have a husband say to a wife: Honey, I don't want any of that extraordinary stuff. Don't keep me on life support.

What Senator ISAKSON wanted to do was to give Medicare patients an opportunity to sit down with a doctor and say: What instruction should I leave? If this is what I believe, whom should I tell? That was a humane, thoughtful amendment. But the critics of health care reform twisted and distorted it

into a death panel that was going to tell Grannie: We are going to pull the plug.

Sad. It was sad, when Senator ISAKSON offered such a good-faith amendment, to have it distorted. It is no wonder if the critics of health care reform would go to those extremes to try to defeat this bill, why other extreme things have been said about it. If you listened on the floor of the Senate over the last several weeks while we have debated health care reform and listened to the speeches from the other side of the aisle, you would believe that this bill is going to destroy Medicare. Many Republican Senators who historically did not support Medicare and wanted to privatize Medicare are now its most fervent champions. You might question their sincerity. We don't do that in the Senate because we don't question motives of people. But I will question their accuracy.

This bill, which is over 2,000 pages, knows the future of Medicare is important to all of us. If we do nothing today, Medicare will go broke in 8 years. We would not be bringing in enough money from payroll taxes to pay the Medicare services we promised in 8 years. That is a fact. But this bill is going to change it. This bill will add 10 years of solvency to Medicare. I wish it were more, but it is a step in the right direction to say to those receiving Medicare and those about to go into Medicare: This important program will be there when you need it; 10 years of added solvency in Medicare; Medicare on sound financial footing for 10 more years because of this bill.

There is something else it does. At the end of our conference between the House and Senate on health care reform, we are going to take care of a problem in Medicare. It is a serious problem. When we passed the Medicare prescription drug program, there wasn't enough money to fund it. They created this strange situation where if you were seriously ill under Medicare and receiving medication, this Medicare Part D plan would pay for prescription drugs up to a certain limit and then stop.

In the midst of a new calendar year, some could find several months into that year that Medicare Part D was not paying for any more prescription drugs. You would be responsible personally to pay for them. After you had paid a certain amount of money, the Part D coverage would kick in again. It was known euphemistically as the doughnut hole, that gap in coverage in Medicare Part D. When this is over, this health care reform is going to fill that gap, close that doughnut hole, give to 45 million Americans under Medicare the peace of mind of knowing that their prescription drugs will be paid for and they will not find themselves exhausting savings or going without it when it comes to basic medication.

That is why this bill is important. That is why some of the things that

have been said in the debate are so misleading.

There is something else this bill does which we ought to take pride in as Senators. Most civilized and developed countries in the world have a health care system that protects their people. We are the only developed country on Earth where a person can die because they don't have health insurance. We are the only one.

You might say: Senator DURBIN, aren't you getting a little carried away? Well, 45,000 people a year do. Let me give you an illustration: What if you had a \$5,000 copay on your health insurance and you didn't have \$5,000 and the doctor says: I am a little bit worried about some of the things you tell me, Senator. I think you need a colonoscopy.

That is something I can understand because my mother had colon cancer. I am very careful about this. I have a history in my family.

But if you had a policy that said the first \$5,000 you have to pay for and went out and asked how much a colonoscopy cost, you would find in many places it is \$3,000. There have been cases—a man from Illinois wrote me. He said: I didn't have the \$3,000 so I skipped the colonoscopy.

Without health insurance, without coverage, without enough money to pay for that basic test, this individual is running the risk of developing a serious cancer that could claim his life or at least cost a fortune to take care of. That is what inadequate health insurance does to you. That is what no health insurance does to you.

At the end of the day, this bill will say, for the first time in the history of this great Nation, 94 percent of the people will have health insurance. Thirty million people today who have no health insurance will have it when it is over. Fifteen million will go into Medicaid because they are in low-income categories.

I met one of those people when I was back in my home State of Illinois. Her name is Judie. She works at a motel in Marion, IL. She is a hostess in the morning for their free continental breakfast—a sweet lady with a big smile on her face, in her early sixties.

She came up to me and said: Senator, I am not sure this health care reform is good for me.

I said: Judie, do you have health insurance?

She said: No, I've never had health insurance, and I'm a few years away from Medicare.

I said: If you don't mind telling me, how much money do you make?

She said: Well, they've cut our hours here at the motel because of the economy. I work about 30 hours a week now, and I make about \$8 an hour. And she said: There isn't a person here you're looking at, working on this motel staff, who has health insurance.

I said: So does that mean your income each year is about \$12,000?

She said: Well, I guess. It's the only job I have. I get by on it.